

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) Stuart D. Trachy				
II. Name of lobbyist's partnership	, firm or corporation, if	any:		
(Name of partners	hip, firm or corporation)			
Two Eagle Square	Concord	NH	03301	
Business Address: (Street)	(Town/City)	(State)	(Zip Code)	
(603) 520-0822	email strachy@aol.com			
(Telephone)	(Fax)		••••	
	hich are not attributable			
Enterprise Holdings (Full)	Name of Client as it annea	rs on the Lobbyist Registration Fo		
All reportable transactions by tunrelated to any particular client.	ne lobbyist (including the	lobbyist's family), or the lobbying	firm listed below which are	
IV. Date of Report April 26, 2017 Reports cover: activity from date of registration to 3/31/17 October 25, 2017 activity from 7/1/17 to 9/30/17		January 31, 2018 🔲	activity from 4/1/17 to 6/30/17	
V. There have been no fees receively this box is checked, complete just Concord, NH 03301.				
If you have paid an honor Expense Reimbursement	or made expenditures, you arium or reimbursed expen	must file Addendum A — Fees and ses, you must file Addendum B — contributions, you must file Adder	Report of Honorariums or	
Sworn Statement/Affirmation by I have read RSA 15, RSA 15-B and the best of my knowledge and belie (Signature of lobbyist) Stuart D. Trachy (Print Name of lobbyist)	RSA 664 and hereby swea	/	rmation is true and complete to	

RECEIVED

APR 2 6 2017

NEW HAMPSon & DEPARTMENT OF STATE